

02-11-04

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Atty. Dkt. No. 066243-0216

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Surwillo et al.

Title: A MEDICAL TESTING SYSTEM
WITH AN ILLUMINATING
COMPONENT AND
AUTOMATIC SHUT-OFF

Appl. No.: 09/915,672

Filing Date: 07/26/2001

Examiner: Frances P. Oropeza

Art Unit: 3762

CERTIFICATE OF EXPRESS MAILING
I hereby certify that this correspondence is being deposited with the
United States Postal Service's "Express Mail Post Office To
Addressee" service under 37 C.F.R. § 1.10 on the date indicated
below and is addressed to: Commissioner for Patents, PO Box
1450, Alexandria, Virginia 22313-1450.

EV417420802 US 2/10/04
(Express Mail Label Number) (Date of Deposit)

Carolyn Simpson

(Printed Name)

Carolyn Simpson

(Signature)

AMENDMENT TRANSMITTAL

Mail Stop AF
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended	Previously Paid For	=	Extra Claims Present	Rate	=	Additional Claims Fee
Total Claims:	28	-	35	=	0	x	\$18.00 = \$0.00
Independents:	8	-	8	=	0	x	\$86.00 = \$0.00
							First presentation of any Multiple Dependent Claims: + \$290.00 = \$0.00
							CLAIMS FEE TOTAL = \$0.00

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FEB 13 2004

TECHNOLOGY CENTER R3700

[] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

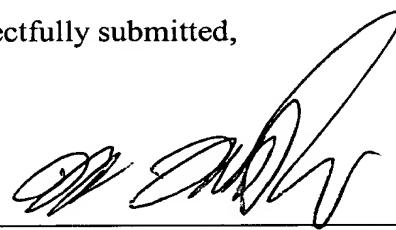
[] Extension for response filed within the first month:	\$110.00	\$0.00
[] Extension for response filed within the second month:	\$420.00	\$0.00
[] Extension for response filed within the third month:	\$950.00	\$0.00
[] Extension for response filed within the fourth month:	\$1,480.00	\$0.00
[] Extension for response filed within the fifth month:	\$2,010.00	\$0.00
	EXTENSION FEE TOTAL:	\$0.00
[] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
	CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:	\$0.00
[]	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	TOTAL FEE:	\$0.00

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-2401. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-2401. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-2401.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

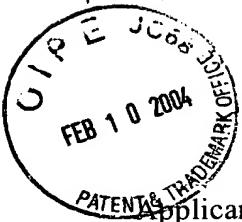
By



Date Feb. 10, 2004

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Facsimile: (414) 297-4900

Marcus A. Burch
Attorney for Applicant
Registration No. 52,673



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EL 417420802 US (Express Mail Label Number)	2/10/04 (Date of Deposit)
Carolyn Simpson (Printed Name)	
<i>Carolyn Simpson</i> (Signature)	

SUPPLEMENTAL AMENDMENT AND REPLY UNDER 37 CFR 1.116

Mail Stop AF
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This communication is responsive to the Notice of Non-Compliant Amendment dated January 20, 2004, concerning the above-referenced patent application.

Amendments to the Specification begin on page 2 of this document.

Amendments to the Claims are reflected in the listing of claims which begins on page 4 of this document.

Remarks/Arguments begin on page 11 of this document.

Please amend the application as follows:

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